CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

1. Date: 7/21/2026 2.a. Candidate or Committee Name: WILL RICHARDSON

2.b. If Committee, Name of Candidate: WILL RICHARDSON 3. Election Date: 8/6/2026

4. Campaign Address: 115 RIVERWALK PLACE

City: MEMPHIS State: TN Zip Code: 38103 Phone: 515-422-1010

5. Candidate Home Address: 115 RIVERWALK PLACE

City: MEMPHIS State: TN Zip Code: 38103 Phone: 515-422-1010

Candidate Email Address: INFO@WILLRICHARDSON.ORG

6. Office Sought: (include district number, if applicable) COUNTY COMMISSION, DISTRICT 8

7. Name of Political Treasurer (may be candidate): Dominique Taylor

Political Treasurer Email Address: DOMINIQUE@JMTFINANCIALSANDTAX.COM

8. Category or Report: (check one)

☐ First Quarter ☑ Second Quarter ☐ Third Quarter ☐ Fourth Quarter ☐ Pre-Primary ☐ Pre-General

☐ Mid-Year Supplemental ☐ Year-End Supplemental ☐ Runoff Election

9. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026

10. Detailed Disclosure: (Check one)

☐ This campaign is exempt from detailed disclosures because contributions (including in-kind) received total $1,000 or less AND expenditures total $1,000 or less for this reporting period. (Complete items 12.d., 12.e., and 12.f.)

☑ This campaign is required to file a detailed financial disclosure because contributions (including in-kind) received total more than $1,000 and/or expenditures total more than $1,000 for this reporting period.

11. I/we do solemnly swear or affirm that the information contained in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign Financial Disclosure Act. Additionally, I/we swear or affirm that no campaign contributions have been expended for the personal financial benefit of the candidate or for any other nonpolitical purpose as defined by the federal internal revenue code.

WILL RICHARDSON (Jul 24, 2026 16:46:00 CDT)	24/07/2026	Dominique Taylor (Jul 24, 2026 16:48:52 CDT)	24/07/2026
Candidate Signature	Date	Political Treasurer Signature	Date
LATONIA RICHARDSON (Jul 24, 2026 16:44:40 CDT)	24/07/202(	MONTERRIO COX (Jul 24, 2026 16:43:53 CDT)	24/07/2026
Witness Signature	Date	Witness Signature	Date

12. Summary:

a.	Balance On Hand Last Report	$ 3,822.55
b.	Total Receipts This Period	$ 3,445.76
c.	Total Disbursements This Period	$ 4,601.68
d.	Balance On Hand (12.a. plus 12.b. minus 12.c.)	$ 2,666.63
e.	Total Loans Outstanding	$ 0.00
f.	Total Obligations Outstanding	$ 0.00

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: WILL RICHARDSON

14. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026

15. Receipts:

a. Unitemized Contributions ($100 or less from each source this period) ..... $ 390.76
(Note: Effective January 16, 2023, Unitemized Contributions are capped at $2,000. See *Instructions* for more information.)

b. Itemized Contributions (over $100 from each source this period) ..... $ 3,055.00

c. Loans Received This Reporting Period ..... $ 0.00

d. Interest Received This Reporting Period ..... $ 0.00

e. Total Receipts (add 15.a., 15.b., 15.c., and 15.d.) (must be shown in item 12.b.) ..... $ 3,445.76

16. Disbursements:

a. Total Expenditures (other than loan payments) ..... $ 4,601.68
(Note: Effective January 16, 2023, all expenditures must be itemized.)

b. Loan Repayments Made This Period ..... $ 0.00

c. Total Obligation Payments Made This Period ..... $ 0.00

d. Total Disbursements (add 16.a. and 16.b.) (must be shown in item 12.c.) ..... $ 4,601.68

17. In-Kind Contributions:

a. Unitemized In-Kind Contributions Received This Period ..... $ 0.00

b. Itemized In-Kind Contributions Received This Period ..... $ 0.00

c. Total In-Kind Contributions Received This Period ..... $ 0.00

18. Obligations:

a. Total Obligations Outstanding (must be shown in item 12.f.) ..... $ 0.00

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: WILL RICHARDSON

2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026

3. Total campaign contributions from preceding page (enter $0 if first page) $ 0.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: ANDRE Middle Name: _____ Last Name: JONES

Address: P O BOX 3984 City: MEMPHIS State: TN Zip Code: 38173

Occupation: DEVELOPER Employer: SELF EMPLOYED

Contribution Received For: ☐ Primary Election ☑ General Election ☐ Runoff (Local Elections Only)

Amount of Contribution: $ 250.00 Date of Contribution: 4/29/2026 Aggregate This Election: $ _____

Business or Organization Name: _____ **OR**

First Name: CHRISTOPHER Middle Name: _____ Last Name: INGRAM

Address: 2621 DARLENE STREET City: MEMPHIS State: TN Zip Code: 38106

Occupation: LEGAL Employer: SELF EMPLOYED

Contribution Received For: ☐ Primary Election ☑ General Election ☐ Runoff (Local Elections Only)

Amount of Contribution: $ 150.00 Date of Contribution: 5/5/2006 Aggregate This Election: $ _____

Business or Organization Name: _____ **OR**

First Name: V LYNN Middle Name: _____ Last Name: EVANS

Address: 588 MONTEIGNE BLVD City: MEMPHIS State: TN Zip Code: 38103

Occupation: CPA Employer: V LYNN EVANS CPA

Contribution Received For: ☐ Primary Election ☑ General Election ☐ Runoff (Local Elections Only)

Amount of Contribution: $ 100.00 Date of Contribution: 5/4/2026 Aggregate This Election: $ _____

Business or Organization Name: _____ **OR**

First Name: JAMILICA Middle Name: _____ Last Name: BURKE

Address: 1706 BELVEDERE COURT City: MEMPHIS State: TN Zip Code: 38104

Occupation: NONPROFIT Employer: SEEDING SUCCESS

Contribution Received For: ☐ Primary Election ☑ General Election ☐ Runoff (Local Elections Only)

Amount of Contribution: $ 250.00 Date of Contribution: 5/5/2026 Aggregate This Election: $ _____

Total Contributions: $ 750.00

(Carry forward to the next page if additional pages of this form are used. If this is the last page of contributions, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: WILL RICHARDSON

2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026

3. Total campaign contributions from preceding page (enter $0 if first page) $750.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: GORTRIA Middle Name: _____ Last Name: BANKS

Address: 4511 SCARLET LEAF COVE City: MEMPHIS State: TN Zip Code: 38141

Occupation: ED Employer: ADS

Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)

Amount of Contribution: $105.00 Date of Contribution: 5/29/2026 Aggregate This Election: $ _____

Business or Organization Name: _____ **OR**

First Name: JAMES Middle Name: _____ Last Name: MOORE

Address: 9918 WYNNGATE DRIVE City: OLIVE BRANCH State: MS Zip Code: 38654

Occupation: SALES Employer: MOORE CRAWFISH

Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)

Amount of Contribution: $100.00 Date of Contribution: 5/29/2026 Aggregate This Election: $ _____

Business or Organization Name: _____ **OR**

First Name: ROBERT Middle Name: _____ Last Name: RICHARSON

Address: 7549 SPRING MORNING CT City: MEMPHIS State: TN Zip Code: 38125

Occupation: OPERATION MANAGER Employer: SEPORA DISTRIBUTION CENTER

Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)

Amount of Contribution: $100.00 Date of Contribution: 5/29/2026 Aggregate This Election: $ _____

Business or Organization Name: _____ **OR**

First Name: ROBERT Middle Name: _____ Last Name: RICHARDSON

Address: 7549 SPRING MORNING CT City: MEMPHIS State: TN Zip Code: 38125

Occupation: _____ Employer: _____

Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)

Amount of Contribution: $100.00 Date of Contribution: 6/29/2026 Aggregate This Election: $ _____

Total Contributions: $1,155.00

(Carry forward to the next page if additional pages of this form are used. If this is the last page of contributions, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: WILL RICHARDSON
2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026
3. Total campaign contributions from preceding page (enter $0 if first page) $ 1,155.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: ______ **OR**
First Name: RODERICK Middle Name: ______ Last Name: HOLMES
Address: 7860 CHAPEL RIDGE DR City: CORDOVA State: TN Zip Code: 38016
Occupation: ATTORNEY Employer: REIFERS HOLMES PETERS
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: $ 1,900.00 Date of Contribution: 6/23/2026 Aggregate This Election: $ ______

Business or Organization Name: ______ **OR**
First Name: ______ Middle Name: ______ Last Name: ______
Address: ______ City: ______ State: ____ Zip Code: ______
Occupation: ______ Employer: ______
Contribution Received For: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: $______ Date of Contribution: ______ Aggregate This Election: $ ______

Business or Organization Name: ______ **OR**
First Name: ______ Middle Name: ______ Last Name: ______
Address: ______ City: ______ State: ____ Zip Code: ______
Occupation: ______ Employer: ______
Contribution Received For: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: $______ Date of Contribution: ______ Aggregate This Election: $ ______

Business or Organization Name: ______ **OR**
First Name: ______ Middle Name: ______ Last Name: ______
Address: ______ City: ______ State: ____ Zip Code: ______
Occupation: ______ Employer: ______
Contribution Received For: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: $______ Date of Contribution: ______ Aggregate This Election: $ ______

Total Contributions: $ 3,055.00
(Carry forward to the next page if additional pages of this form are used. If this is the last page of contributions, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: WILL RICHARDSON

2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026

3. Total in-kind contributions from preceding page (enter $0 if first page) $ 0.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH IN-KIND CONTRIBUTION. In-kind contributions totaling more than one hundred dollars ($100) from any contributor during the period must be reported.

Business or Organization Name: ______ **OR**

First Name: ______ Middle Name: ______ Last Name: ______

Address: ______ City: ______ State: ____ Zip Code: ______

Occupation: ______ Employer: ______

In-Kind Contribution Received For: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)

In-Kind Contribution Value: $______ In-Kind Contribution Date: ______ Aggregate This Election: $______

Description of In-Kind Contribution: ______

Business or Organization Name: ______ **OR**

First Name: ______ Middle Name: ______ Last Name: ______

Address: ______ City: ______ State: ____ Zip Code: ______

Occupation: ______ Employer: ______

In-Kind Contribution Received For: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)

In-Kind Contribution Value: $______ In-Kind Contribution Date: ______ Aggregate This Election: $______

Description of In-Kind Contribution: ______

Business or Organization Name: ______ **OR**

First Name: ______ Middle Name: ______ Last Name: ______

Address: ______ City: ______ State: ____ Zip Code: ______

Occupation: ______ Employer: ______

In-Kind Contribution Received For: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)

In-Kind Contribution Value: $______ In-Kind Contribution Date: ______ Aggregate This Election: $______

Description of In-Kind Contribution: ______

Business or Organization Name: ______ **OR**

First Name: ______ Middle Name: ______ Last Name: ______

Address: ______ City: ______ State: ____ Zip Code: ______

Occupation: ______ Employer: ______

In-Kind Contribution Received For: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)

In-Kind Contribution Value: $______ In-Kind Contribution Date: ______ Aggregate This Election: $______

Description of In-Kind Contribution: ______

Total In-Kind Contributions: $ 0.00

(Carry forward to the next page if additional pages of this form are used. If this is the last page of in-kind contributions, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: WILL RICHARDSON

2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026

3. Total campaign expenditures from preceding page (enter $0 if first page) $ 0.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. **All expenditures must be itemized.** If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: MAILCHIMP **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: ____ Zip Code: _____

Purpose of Expenditure: ADVERTISING

Amount of Expenditure: $ 43.90 Date of Expenditure: $ 4/27/2026

Business or Organization Name: QUICKSBOOKS **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: ____ Zip Code: _____

Purpose of Expenditure: SOFTWARE

Amount of Expenditure: $ 83.42 Date of Expenditure: $ 4/27/2026

Business or Organization Name: SHELL GAS **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: 464 N MAIN STREET City: MEMPHIS State: TN Zip Code: 38105

Purpose of Expenditure: TRAVEL/ GAS

Amount of Expenditure: $ 50.63 Date of Expenditure: $ 4/27/2026

Business or Organization Name: LITTLE CAESARS PIZZA **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: 2105 UNION AVENUE City: MEMPHIS State: TN Zip Code: 38103

Purpose of Expenditure: MEALS FOR VOLUNTEERS

Amount of Expenditure: $ 109.53 Date of Expenditure: $ 4/27/2026

Business or Organization Name: DIRECT FX SOLUTIONS INC **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: 8811 HWY 51 N City: SOUTHAVEN State: MS Zip Code: 38671

Purpose of Expenditure: PRINTING AND PRODUCTIONS

Amount of Expenditure: $ 1,275.87 Date of Expenditure: $ 5/8/2026

Total Expenditures: $ 1,563.35

(Carry forward to the next page if additional pages of this form are used. If this is the last page of expenditures, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: WILL RICHARDSON

2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026

3. Total campaign expenditures from preceding page (enter $0 if first page) $ 1,563.35

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. **All expenditures must be itemized.** If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: BLUFF CITY MAGAZINE **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: 4728 SPOTTSWOOD AVE 160 City: MEMPHIS State: TN Zip Code: 38117

Purpose of Expenditure: ADVERTISING

Amount of Expenditure: $ 292.50 Date of Expenditure: $ 5/12/2026

Business or Organization Name: REGIONS BANK **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: 88 UNION AVENUE City: MEMPHIS State: TN Zip Code: 38103

Purpose of Expenditure: BANK FEES

Amount of Expenditure: $ 36.00 Date of Expenditure: $ 4/30/2026

Business or Organization Name: UBER **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: 1515 3RD ST City: SAN FRANCISCO State: CA Zip Code: 94158

Purpose of Expenditure: POLL WORKERS TRAVEL

Amount of Expenditure: $ 138.19 Date of Expenditure: $ 5/6/2026

Business or Organization Name: THE HOME DEPOT **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: 1627 POPLAR AVE City: MEMPHIS State: TN Zip Code: 38104

Purpose of Expenditure: SUPPLIES

Amount of Expenditure: $ 124.09 Date of Expenditure: $ 6/18/2026

Business or Organization Name: ALICE MCKENZIE **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: 1128 MOOREHEAD STREET City: MEMPHIS State: TN Zip Code: 38107

Purpose of Expenditure: POLL WORKER

Amount of Expenditure: $ 120.00 Date of Expenditure: $ 4/27/2026

Total Expenditures: $ 2,274.13

(Carry forward to the next page if additional pages of this form are used. If this is the last page of expenditures, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: WILL RICHARDSON

2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026

3. Total campaign expenditures from preceding page (enter $0 if first page) $ _____

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. **All expenditures must be itemized.** If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: _____ **OR**

First Name: BRENDA Middle Name: _____ Last Name: FRANKLIN

Address: 383 MADISON AVENUE City: MEMPHIS State: TN Zip Code: 38103

Purpose of Expenditure: POLL WORKER

Amount of Expenditure: $ 880.00 Date of Expenditure: $ 4/27/2026

Business or Organization Name: _____ **OR**

First Name: CAROLYN Middle Name: _____ Last Name: GAITHER

Address: 603 GRACE MANOR #105 City: MEMPHIS State: TN Zip Code: 38107

Purpose of Expenditure: POLL WORKER

Amount of Expenditure: $ 420.00 Date of Expenditure: $ 4/27/2026

Business or Organization Name: _____ **OR**

First Name: DOMINIQUE Middle Name: _____ Last Name: PHILLIPS

Address: 640 UPTOWN ST City: MEMPHIS State: TN Zip Code: 38107

Purpose of Expenditure: POLL WORKER

Amount of Expenditure: $ 20.00 Date of Expenditure: $ 4/27/2026

Business or Organization Name: _____ **OR**

First Name: NAKIA Middle Name: _____ Last Name: BARNES

Address: 648 TATE AVENUE #201 City: MEMPHIS State: TN Zip Code: 38126

Purpose of Expenditure: POLL WORKER

Amount of Expenditure: $ 60.00 Date of Expenditure: $ 4/27/2026

Business or Organization Name: _____ **OR**

First Name: LAKESHA Middle Name: _____ Last Name: WEBSTER

Address: 4416 RYAN STREET City: MEMPHIS State: TN Zip Code: 38127

Purpose of Expenditure: POLL WORKER

Amount of Expenditure: $ 120.00 Date of Expenditure: $ 4/27/2026

Total Expenditures: $ 3,774.13

(Carry forward to the next page if additional pages of this form are used. If this is the last page of expenditures, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: WILL RICHARDSON

2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026

3. Total campaign expenditures from preceding page (enter $0 if first page) $ 3,774.13

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. **All expenditures must be itemized.** If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: STRIPE, INC. **OR**
First Name: ______ Middle Name: ______ Last Name: ______
Address: ______ City: ______ State: ____ Zip Code: ______
Purpose of Expenditure: MERCHANT BANK FEES
Amount of Expenditure: $ 479.47 Date of Expenditure: $ ______

Business or Organization Name: ACT BLUE **OR**
First Name: ______ Middle Name: ______ Last Name: ______
Address: ______ City: ______ State: ____ Zip Code: ______
Purpose of Expenditure: FUNDRAISING FEES
Amount of Expenditure: $ 348.08 Date of Expenditure: $ ______

Business or Organization Name: ______ **OR**
First Name: ______ Middle Name: ______ Last Name: ______
Address: ______ City: ______ State: ____ Zip Code: ______
Purpose of Expenditure: ______
Amount of Expenditure: $ ______ Date of Expenditure: $ ______

Business or Organization Name: ______ **OR**
First Name: ______ Middle Name: ______ Last Name: ______
Address: ______ City: ______ State: ____ Zip Code: ______
Purpose of Expenditure: ______
Amount of Expenditure: $ ______ Date of Expenditure: $ ______

Business or Organization Name: ______ **OR**
First Name: ______ Middle Name: ______ Last Name: ______
Address: ______ City: ______ State: ____ Zip Code: ______
Purpose of Expenditure: ______
Amount of Expenditure: $ ______ Date of Expenditure: $ ______

Total Expenditures: $ 4,601.68
(Carry forward to the next page if additional pages of this form are used. If this is the last page of expenditures, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. Candidate or Committee Name: ____________________

2. Reporting Period: Start Date: ____________ End Date: ____________

3. Complete the appropriate items for each loan totaling more than one hundred dollars ($100).

Complete the following for the source of each loan received and/or outstanding during the period.

Business or Organization Name: ____________________ **OR**

First Name: ____________ Middle Name: ____________ Last Name: ____________

Address: ____________ City: ____________ State: ____ Zip Code: ____________

Outstanding Loan Balance (Beginning) .... $ ____________

Loans Received .... $ ____________

Loan Payments .... $ ____________

Outstanding Loan (End) .... $ ____________

Loan Received For: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)

Date of Loan: ____________

List all endorsers or guarantors for above loan (If more space is needed, please attach additional pages.)

Business or Organization Name: ____________________ **OR**

First Name: ____________ Middle Name: ____________ Last Name: ____________

Address: ____________ City: ____________ State: ____ Zip Code: ____________

Amount Guaranteed Outstanding: $____________

Business or Organization Name: ____________________ **OR**

First Name: ____________ Middle Name: ____________ Last Name: ____________

Address: ____________ City: ____________ State: ____ Zip Code: ____________

Amount Guaranteed Outstanding: $____________

Business or Organization Name: ____________________ **OR**

First Name: ____________ Middle Name: ____________ Last Name: ____________

Address: ____________ City: ____________ State: ____ Zip Code: ____________

Amount Guaranteed Outstanding: $____________

Business or Organization Name: ____________________ **OR**

First Name: ____________ Middle Name: ____________ Last Name: ____________

Address: ____________ City: ____________ State: ____ Zip Code: ____________

Amount Guaranteed Outstanding: $____________

Totals for all loans (Complete this page for each outstanding loan during the period. Complete this section only on last page of loans. Total loans received and loan payments should be shown on summary page. Outstanding loan balance should be shown on front page.)

Balance (Beginning) .... $____________

Loans Received .... $____________

Loan Payments .... $____________

Outstanding Loan (End) .... $____________

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. Candidate or Committee Name: ______________________________

2. Reporting Period: Start Date: ______________ End Date: ______________

3. Complete the appropriate items for each obligation owed to a person/vendor at the end of the reporting period.

Business Name: ______________________________

First Name: ______________ Middle Name: ______________

Last Name: ______________________________

Address: ______________________________

City: ______________________________

State: __________ Zip Code: ______________

Description of Obligation:			
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
$	$	$	$

Business Name: ______________________________

First Name: ______________ Middle Name: ______________

Last Name: ______________________________

Address: ______________________________

City: ______________________________

State: __________ Zip Code: ______________

Description of Obligation:			
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
$	$	$	$

Business Name: ______________________________

First Name: ______________ Middle Name: ______________

Last Name: ______________________________

Address: ______________________________

City: ______________________________

State: __________ Zip Code: ______________

Description of Obligation:			
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
$	$	$	$

Business Name: ______________________________

First Name: ______________ Middle Name: ______________

Last Name: ______________________________

Address: ______________________________

City: ______________________________

State: __________ Zip Code: ______________

Description of Obligation:			
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
$	$	$	$

TOTALS

(Carry forward to the next page if additional pages of this form are used. If this is the last page of obligations, the Total from "Outstanding Balance - (Period End)" column must also be shown on the summary on first page.)

Outstanding Balance (Period Beginning)	Debt Incurred	Payments This Period	Outstanding Balance (Period End)
$	$	$	$

Candidate CFD Packet 2ND QTR 2026

Final Audit Report 2026-07-24

Created:	2026-07-24
By:	Dominique Taylor (dominique@jmtfinancialsandtax.com)
Status:	Signed
Transaction ID:	CBJCHBCAABAAsMcDtJVG6UHK72MWi3AHyYJfM2NGQdVj

"Candidate CFD Packet 2ND QTR 2026" History

Document created by Dominique Taylor (dominique@jmtfinancialsandtax.com)
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Document emailed to WILL RICHARDSON (info@willrichardson.org) for signature
2026-07-24 - 9:42:34 PM GMT

Document emailed to LATONIA RICHARDSON (info.toniarichardson@gmail.com) for signature
2026-07-24 - 9:42:35 PM GMT

Document emailed to Dominique Taylor (dominique@jmtfinancialsandtax.com) for signature
2026-07-24 - 9:42:35 PM GMT

Document emailed to MONTERRIO COX (monterrio.coxjrmap@gmail.com) for signature
2026-07-24 - 9:42:35 PM GMT

Email viewed by WILL RICHARDSON (info@willrichardson.org)
2026-07-24 - 9:43:13 PM GMT

Email viewed by LATONIA RICHARDSON (info.toniarichardson@gmail.com)
2026-07-24 - 9:43:22 PM GMT

Email viewed by MONTERRIO COX (monterrio.coxjrmap@gmail.com)
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